PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application or Docket Number

3666

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			42				r	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	ļ	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			43 minus 20=		. 23		ľ	X\$ 9=		OR	X\$18=	44
INDEPENDENT CLAIMS			6 minus 3 =		• 3		ŀ	X40=		OR	X80=	240
ΜU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				ľ	+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	L	TOTAL		OR		1394
	С	LAIMS AS A	MENDED	ENDED - PART II				TOTAL			OTHER THAN	
		(Column 1)	(Column 2)			(Column 3)	_	SMALL E	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL A 134	=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
							L	TOTAL			TOTAL	
		A	DDIT. FEE		,	ADDIT. FEE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) IEST IBER OUSLY FOR	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> - </u>		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	
							L	TOTAL		00	TOTAL	
(Column 1) (Column 2) (Column 3)								DDIT. FEE		Join	ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	<u> </u>	Minus	***		<u> </u>	╽┟	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										. 070	
	If the entry in colu	L	+135=		OR	+270=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er four	nd in the app	ropriate box	in co	lumn 1.	